PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 42393 211396													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			27				Γ	RATE FEE			RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			27 minus 20=		. 7			X\$ 9=		OR	X\$18=	126	
INDEPENDENT CLAIMS			6 minus 3 =		• 3			X40=			X80=	240	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+	*		OR		240	
• 16	the difference	in column 1 is	less than zero, enter "0" in colum			olumn 2	L	+135=		OR	+270=	(7/	
CLAIMS AS AMENDED - PART II										OR	OTHER	1076	
6	-24-05	(Column 1)	(Column 2) (Column 3)					SMALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total =	. 30	Minus	. 2	7	- 3		X\$ 9=		OR	X\$18=	150	A
	Independent	. 6	Minus	••• (6	-6-		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
REST AVAILABLE COPY TOTAL											TOTAL		
		(Column 1)		(Colu		(Column 3)	AD	DIT. FEE			ADDIT: FEE		
AMENDMENT B	/	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=		X40=		OR	X80=		
L	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	CLAIM		\	+135=		OR	+270=		
							L	TOTAL		08	TOTAL	·	
		(Column 1)		(Colu	mn 2)	(Column 3)	ΑU	DIT. FEE			ADDIT. FEE		1
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RAŢE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=	, ,	OR	X\$18=		
	Independent	•	Minus	•••		=		X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE										OR	+270= TOTAL		
•••	If the "Highest Num	mbe Previously Pa	YAICA	FILE C	OF	3, enter "3." highest numbe	ADI r lound	DIT. FEE L I in the app	propriate box		ADDIT. FEE lumn 1.		

FORM PTO-875 (Rev. 8/00) Application or Docket Number